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CONFIRMATION NO. 6971

|                                                                                                                                                                                                                                                                                                                     |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/624,328                                                                                                                                                                                                                                                                                  | <b>FILING OR 371(c) DATE</b><br>07/22/2003<br><b>RULE</b>                                                         | <b>CLASS</b><br>514           | <b>GROUP ART UNIT</b><br>1614                                                                                                                                                                                                                                                   | <b>ATTORNEY DOCKET NO.</b><br>13024/38627A |                                |
| <b>APPLICANTS</b><br>John McMichael, Delanson, NY;<br>Kenneth A. Unice, Meadville, PA;                                                                                                                                                                                                                              |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/424,443 11/07/2002                                                                                                                                                                                                                               |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>** FOREIGN APPLICATIONS *****</b>                                                                                                                                                                                                                                                                                |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b><br>** 03/19/2004                                                                                                                                                                                                                              |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <i>Julia Hughes arb</i><br>Examiner's Signature Initials |                                                                                                                   | <b>STATE OR COUNTRY</b><br>NY | <b>SHEETS DRAWING</b><br>0                                                                                                                                                                                                                                                      | <b>TOTAL CLAIMS</b><br>28                  | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>4743                                                                                                                                                                                                                                                                                              |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>TITLE</b><br>Method of treatment of psychological conditions by administration of nerve growth factor                                                                                                                                                                                                            |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>FILING FEE RECEIVED</b><br>447                                                                                                                                                                                                                                                                                   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                            |                                |